2021 Music Entry Form

CONSENT? _____

| Veteran Name: | | Last 4: |
|---------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------|
| Veteran Phone Number: | | Age: |
| Veteran Mailing Address (including Zip Code): | | Email: |
| Would you like us to add you | to the mailing list to receive info for | future years? Circle one: |
| Yes: My contact info has NOT changed since last year. | Yes: My contact info from last year has changed. Please update | No: I do not want to receive updates. |
| | | |
| Title of Piece #1: | Fro | m what Broadway show (if applicable?) |
| | Ins | trument being played if not vocal? |
| Title of Piece #2: | Fro | m what Broadway show (if applicable?) |
| | Ins | trument being played if not vocal? |
| Title of Piece #3: | Fro | m what Broadway show (if applicable?) |
| | Ins | trument being played if not vocal? |
| true: I/we have read all the rule olaces first at the national level olaces. Veterans Creative Arts Festival. | es into the competition, you are confi es for the division in which I/we am/a , I/we understand that I/we will be inv It is required that I/we attend and pa with the stage show performance. | re entering. If my/our entry vited to attend the National |
| Category Number/ | | |
| Name for Entry #1: | | |
| Category Number/ Name for Entry #2: | | |
| Category Number/ Name for Entry #2: | | |